IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re United States Patent Application of:

Applicants: William J. Jetter et al.

Serial No.: 10/707,593

Date Filed: December 23, 2003

Title: SYSTEM AND METHOD TO MANAGE SUPPLY CHAIN SETTLEMENT, RISK AND LIQUIDITY

Docket No.: 1001US1.014033.000015

Examiner: Oluseye Iwarere

Confirmation No.: 1592

Customer No.: 24239

Mail Stop 16
Director of the U.S. Patent and Trademark Office
P.O. Box 1450
Alexandria, VA 22313-1450

REQUEST FOR REFUND

Sir/Madam:

It has recently come to our attention that the United States Patent and Trademark Office made a withdrawal of \$220.00 from Deposit Account No. 13-4365 in the name of Moore & Van Allen, PLLC on March 16, 2010, regarding Application Serial No. 10/707,593.

On December 23, 2003, applicant filed Application Serial No. 10/707,593 with 5 independent claims. Fees for two extra independent claims were paid upon filing. On March 16, 2010, The United States Patent and Trademark Office issued a Patent Application Fee Determination Record signed by legal instrument examiner Tia A. Bentley indicating that fees for only four independent claims were previously paid. A Patent Application Fee Determination Record signed by Mary A. Holmes was issued on March 31, 2010, indicating that fees for all five independent claims were previously paid. Copies of the foregoing documents are attached.

In light of the fact that fees for five independent claims were paid at the time of filing the application, the applicant respectfully requests that the Commissioner refund the March 16, 2010 electronic funds transfer in the amount of \$220.00, and credit Deposit Account No. 13-4365 for the \$220.00, in the name of Moore & Van Allen, PLLC.

If any other issues remain outstanding or if further documentation is required, the Office is respectfully requested to contact the undersigned at (919) 286-8000, so that such issues may be promptly resolved.

Respectfully submitted,

MOORE & VAN ALLEN, PLLAC

e: **7//b//0**

R. Brian Drøzd

By:

Registration No. 55,130 Moore & Van Allen, PLLC 430 Davis Drive, Suite 500 Morrisville, NC 27560-6832

Telephone: (919) 286-8000 Facsimile: (919) 286-8199 PTO/SB/06 (07-06)
Approved for use through 1/31/2007. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE to a collection of information unless it displays a valid OMB control number.

PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875							Application or Docket Number 10/707,593		Filing Date 12/23/2003		To be Mailed	
APPLICATION AS FILED — PART I (Column 1) (Column 2)							SMALL ENTITY			OTHER THAN OR SMALL ENTITY		
				·	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)	
	BASIC FEE (37 CFR 1.16(a), (b), (c)	or (c))	N/A		N/A		N/A		1	N/A		
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A		N/A			N/A		
	EXAMINATION FE (37 CFR 1.16(o), (p), o		N/A		N/A		N/A			N/A		
	TAL CLAIMS CFR 1.16(i))		min	nus 20 = *			x \$ =		OR	x \$ =		
	EPENDENT CLAIM CFR 1.16(h))		minus 3 =		•		X \$ =			x \$ =		
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).												
	MULTIPLE DEPEN	IDENT CLAIM PR	ESENT (3	7 CFR 1.16(j))					ŀ			
* If t	the difference in colu	ımn 1 is less than	zero, ente	r "0" in column 2.		_	TOTAL			TOTAL		
APPLICATION AS AMENDED - PART II (Column 1) (Column 2) (Column 3)				_ ,	SMALL ENTITY OR		OTHER THAN SMALL ENTITY					
TN.	03/31/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
)ME	Total (37 CFR 1.16(i))	· 61	Minus	~ 65	= 0		X \$ ≃		OR	X \$52=	0	
AMENDMENT	Independent (37 CFR 1.16(h))	* 5	Minus	***5	= 0		X \$ =		OR	X \$220=	0	
4MF	Application Si	ze Fee (37 CFR	1.16(s))									
,	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR			
						TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	0		
		(Column 1)		(Column 2)	(Column 3)							
		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
EN.	Total (37 CFR 1.16(i))	*	Minus	K#	-		x \$ =		OR	x \$ =		
AMENDMENT	Independent (37 CFR 1.16(h))	•	Minus	***	=		x \$ =		OR	X \$ =		
EN I	Application Size Fee (37 CFR 1.16(s))											
AM	FIRST PRESEN	ITATION OF MULTI	PLE DEPEN	DENT CLAIM (37 CFF	₹ 1.16(j))				OR			
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE		
** If *** If	* If the entry in column 1 is less than the entry in column 2, write *0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter *20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter *3". The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

P	Under the Pa		E DET	ERMINATION			pplication or l	of information unle Docket Number 17,593	Fil	plays a valid ing Date 23/2003	OMB control number To be Mailed
	Al	PPLICATION	AS FILE		Column 2)		SMALL	ENTITY [OR		HER THAN
	FOR	N	UMBER FII	_ED NU	MBER EXTRA		RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b),	or (c))	N/A		N/A		N/A			N/A	,
	SEARCH FEE (37 CFR 1.16(k), (l), (or (m))	N/A		N/A		N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A		N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		mir	nus 20 = *			x \$ =		OR	x \$ =	
	EPENDENT CLAIM CFR 1.16(h))	s	m	inus 3 = *			x \$ =			x \$ =	
	APPLICATION SIZE (37 CFR 1.16(s)) MULTIPLE DEPEN	shee is \$2 addi 35 U	ets of pap 250 (\$125 tional 50 : 1.S.C. 41(ation and drawing er, the application for small entity) sheets or fraction a)(1)(G) and 37	n size fee due for each n thereof, See						
<u></u>	the difference in col				•	J	TOTAL		ł	TOTAL	
	APP	(Column 1)	AMENE	DED - PART II (Column 2)	(Column 3)		SMAL	L ENTITY	OR		ER THAN ALL ENTITY
AMENDMENT	03/16/2010	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
ME	Total (37 CFR 1.16(i))	∙ 61	Minus	** 65	= 0		x \$ =		OR	X \$52=	0
NE NE	Independent (37 CFR 1.16(h))	* 5	Minus	***4	= 1		x \$ =		OR	X \$220=	220
\ME	Application Size Fee (37 CFR 1.16(s))										
/	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))								OR		
						4 1	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	220
		(Column 1) CLAIMS		(Column 2) HIGHEST	(Column 3)	_					
		REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	*	Minus	**	=		x \$ =		OR	x \$ =	
	Independent (37 CFR 1.16(h))	*	Minus	***	=	1	x \$ =		OR	x \$ =	
AMENDMENT	Application Size Fee (37 CFR 1.16(s))										
ΑM	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))					1			OR		
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
** If ***	the entry in column the "Highest Numbo f the "Highest Numb "Highest Number P	er Previously Paid er Previously Pai	For" IN TH	HIS SPACE is less HIS SPACE is less	than 20, enter "20's than 3, enter "3".		/ΤΙΑ A.	nstrument Ex BENTLEY/ priate box in colu		er:	

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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FEE TRANSMITTAL

Electronic Version v08

Stylesheet Version v08.0

Title of Invention SYSTEM AND METHOD TO MANAGE SUPPLY CHAIN SETTLEMENT, RISK AND LIQUIDITY

Application Number:

Date:

First Named Applicant:

William J. Jetter

Attorney Docket Number:

014033.000015

TOTAL FEE AUTHORIZED \$ 1752

Patent fees are subject to annual revisions on or about October 1st of each year.

Filing as large entity

BASIC FILING FEE

Fee Description	Fee Code	Amount \$	Fee Paid \$
Utility Filing Fee	1001	770	
		Subtotal Fo	r Basic Filing Fees: \$ 770

EXTRA CLAIM FEES

Fee Description	Extra Claim	Fee Code	Amount \$	Fee Paid \$
Total Claims: 65	45	1202	18	810
Independent Claims: 5	2	1201	86	172
•			Subtotal For Extra (Claims Fees: \$ 982

AUTHORIZED BILLING INFORMATION

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit account number:

134365

Access Code

Deposit name:

Moore and Van Allen PLLC

Deposit authorized name:

Charles L. Moore, Jr.

Signature:

Charles L. Moore, Jr.

Date (YYYYMMDD):

2003-12-23

Charge Any Additional Fee Required Under 37 C.F.R. Sections 1.16 and 1.17.

Document code: WFEE

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